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APPLICANTS

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** CONTINUING DATA *****
 This application is a DIV of 09/696,128 10/25/2000 PAT 6,605,090 *sh emy*

** FOREIGN APPLICATIONS *****
None emy

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
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Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>emy</i> Examiner's Signature Initials	STATE OR COUNTRY TN	SHEETS DRAWING 10	TOTAL CLAIMS 28	INDEPENDENT CLAIMS 3
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TITLE
 Non-metallic implant devices and intra-operative methods for assembly and fixation

<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing)
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FILING FEE RECEIVED 894	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit _____
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